PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| appropriate. All further indicated unless correcte maintenance fee notificate | ed below or directed oth | ng the Patent, advance of herwise in Block I, by (a | a) specifying a new co | or ma | ondence address; | and/or | (b) indicating a separ | ate "FEE ADDRESS" for |
|--|--|--|---|---|---|---------------------------------------|---|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | | |
| 42640 7590 08/08/2007 DILLON & YUDELL LLP 8911 NORTH CAPITAL OF TEXAS HWY SUITE 2110 | | | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | | |
| AUSTIN, TX 78 | 759 | | | | | | | (Depositor's name) |
| | | | | | | | | (Signature) |
| | | | . [| | | | | (Date) |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENT | NTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. |
| 10/757,650 | 01/14/2004 | | Patrick Evan Maupin | | | | SILA.0009 | 3934 |
| FITLE OF INVENTION | : METHOD FOR HANI | DLING DATA TRANSM | IISSIONS WITHIN A I | MOD | EM | | | |
| APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE D | UE | PREV. PAID ISSUE | FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1400 | \$300 | | \$0 | | \$1700 | 11/08/2007 |
| EXAM | INER | ART UNIT | CLASS-SUBCLASS | | | | | |
| FLORES, LEON 2611 | | 2611 | 375-295000 | | | | | |
| Change of corresponde CFR 1.363). Change of corresponde CFR 1.363). Change of corresponde CFR 1.363. The change of corresponde CFR 1.363. The change of corresponde CFR 1.363. Address form PTO/SE/47; Rev 03-0 Number is required. ASSIGNEE NAME ASSIGNEE NAME ASSIGNEE NOTE: Unlarecordation as set fortile. | (1) the names of up or agents OR, altern (2) the name of a sregistered attorney 2 registered patent listed, no name will THE PATENT (print or data will appear on the Ta substitute for filing | the names of up to 3 registered patent attorneys agents OR, alternatively, the name of a single firm (having as a member a gistered attorney or agent) and the names of up to egistered attorneys or agent) and the names of up to egistered patent attorneys or agents. If no name is ted, no name will be printed. ATENT (print or type) will appear on the patent. If an assignee is identified below, the document has been filed for bestitute for filing an assignment. | | | | | | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Austin, Texas Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government | | | | | | | | |
| la. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies | | | b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3083 (enclose an extra copy of this form). | | | | | |
| a. Applicant claim | tus (from status indicate s SMALL ENTITY statu d Publication Fee (if req | us. See 37 CFR 1.27. | d from anyone other th | _ | _ | | TITY status. See 37 CF | R 1.27(g)(2). e assignee or other party in |
| Authorized Signature | de Ta | ates Patent and Trademark | Conice. | | Date Oct | . 2 | , 2007 | |
| | Typed or printed nameAntony P. Ng | | | | Registration N | | | |
| This collection of inform an application. Confiden submitting the complete this form and/or suggesti | nation is required by 37 (tiality is governed by 35 d application form to the ions for reducing this bu | CFR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary urden, should be sent to the | on is required to obtain 1.14. This collection i y depending upon the i ne Chief Information O | or re is esti- indivi | etain a benefit by the mated to take 12 r dual case. Any co r, U.S. Patent and | he publ ninutes mment Traden | lic which is to file (and to complete, including s on the amount of times hark Office, U.S. Depa | by the USPTO to process) g gathering, preparing, and se you require to complete rtment of Commerce, P.O. |

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| appropriate. All further indicated unless corrects maintenance fee notifical | correspondence includired below or directed off | ng the Patent, advance on the Patent, advance of the Patent, advance | rders and notification of na) specifying a new corres | naintenance fees w pondence address; | ill be mailed to the current and/or (b) indicating a sepa | correspondence address as arate "FEE ADDRESS" for | |
|---|---|--|--|--|--|---|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | |
| 42640 | 7590 08/08 | /2007 | have | tits own certificate | of mailing or transmission. | | |
| DILLON & YU 8911 NORTH C SUITE 2110 | JDELL LLP APITAL OF TEXA | | I her State addr trans | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | |
| AUSTIN, TX 78 | 739 | | [| | | (Depositor's name) | |
| | | | | | **** | (Signature) | |
| | | | | | | (Date) | |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/757,650 | 01/14/2004 | | Patrick Evan Maupin | | SILA.0009 | 3934 | |
| TITLE OF INVENTION | : METHOD FOR HANI | · · · · · · · · · · · · · · · · · · · | IISSIONS WITHIN A MOI | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUI | FEE TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1400 | \$300 | \$0 | \$1700 | 11/08/2007 | |
| EXAM | INER | ART UNIT | CLASS-SUBCLASS | | | | |
| FLORES | S, LEON | 2611 | 375-295000 | | | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Silicon Laboratories Austin, Texas | | | | | | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): | | | | | | | |
| 4a. The following fee(s) are submitted: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies2 | | | 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3083 (enclose an extra copy of this form). | | | | |
| 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). | | | | | | FR 1.27(g)(2). | |
| NOTE: The Issue Fee an | d Publication Fee (if rec | | ed from anyone other than t | - | stered attorney or agent; or the | | |
| Authorized Signature | Anty | m | | Date Oct | 2, 2007 | | |
| Typed or printed nam | | | | _ | No. 43,427 | | |
| This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. | | | | | | | |

Approved for use through 05/31/2006. OMB 0651-0016

U.S. Patent and Trademark Office; U. S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

"FEE ADDRESS" INDICATION FORM

| Address to: Mail Stop M Correspondence Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | 3 | | | | | |
|--|--|--|--|--|--|--|
| address for maintenance fer patentee would like correspondence address for address for the patent or all the space provided. If there application, you must check | e purposes (hereafter, fee ondence related to mainter the application. If there is owed application, check this no Customer Number as the second box below | a Customer Number can be established as the fee address). A fee address should be specified when the nance fees to be mailed to a different address than the is a Customer Number already associated with the fee e first box below and provide the Customer Number in associated with the fee address for the patent or allowed and attach a Request for Customer Number form mbers, see the Manual of Patent Examining Procedure | | | | |
| Please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with: | | | | | | |
| Customer Number: | 46204 | | | | | |
| OR | | | | | | |
| Request for Customer Number (PTO/SB/125) attached hereto in the following listed application(s) for which the Issue Fee has been paid for patent(s). | | | | | | |
| PATENT N (if knov | | APPLICATION NUMBER | | | | |
| | | 10/757,650 | | | | |
| Completed by (check one): | | | | | | |
| Applicant/Inventor | | Autylin | | | | |
| | | Signature | | | | |
| Attorney or Agent of record43,427 | | ANTONY P. NG | | | | |
| (Reg. No.) Typed or printed name | | | | | | |
| Assignee of record of the entire interest. See 37 CFR 3.71. 512.343.616 | | | | | | |
| Statement under 37 CFR 3 (Form PTO/SB/96) | 3.73(b) is enclosed. | Requester's telephone number | | | | |
| Assignee recorded at Ree | Frame | 10/02/2007 | | | | |
| | | Date | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below*. | | | | | | |
| * Total of1 | forms are submitted. | | | | | |

This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop M Correspondence, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.